




<b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2005</b>		Docket Number TAL: 1016.0098	
Application Number 10/626,903		Filed 07/25/2003	
For PROBE STATION THERMAL CHUCK WITH SHIELDING FOR CAPACITIVE CURRENT			
Art Unit 2829		Examiner Chan, Emily Y.	
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):			
		<u>Fee</u>	<u>Small Entity Fee</u>
<input checked="" type="checkbox"/>	One month (37 CFR 1.17(a)(1))	\$120	\$60 <u>\$120</u>
<input type="checkbox"/>	Two months (37 CFR 1.17(a)(2))	\$450	\$225 <u></u>
<input type="checkbox"/>	Three months (37 CFR 1.17(a)(3))	\$1,020	\$510 <u></u>
<input type="checkbox"/>	Four months (37 CFR 1.17(a)(4))	\$1,590	\$795 <u></u>
<input type="checkbox"/>	Five months (37 CFR 1.17(a)(5))	\$2,160	\$1,080 <u></u>
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27			
<input checked="" type="checkbox"/> A check in the amount of the fee is enclosed.			
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.			
<input type="checkbox"/> The Director has already been authorized to charge in this application to a Deposit Account.			
<input checked="" type="checkbox"/> The Director is hereby authorized to charge any fee which may be required, or credit any overpayment to Deposit Account Number <u>03-1550</u> I have enclosed a duplicate copy of this sheet.			
I am the <input type="checkbox"/> applicant/ inventor.			
<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37CFR 3.73(b) is enclosed.			
<input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>28,876</u>			
<input type="checkbox"/> attorney or agent under 37 CFR 1.34			
Registration number if acting under 37 CFR 1.34 <u></u>			
 Signature		<u>12/30/2005</u> Date	
<u>Timothy A. Long</u> Typed or printed name		<u>503.227.5631</u> Telephone Number	
Note: Signatures of all inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required.			
<input type="checkbox"/> Total of <u></u> forms are submitted.			